

Session Dates: \_\_\_\_\_

Session Times: \_\_\_\_\_

**Please note that the course must be taught in at least four classes of four hours or less.**

## PRIME FOR LIFE ROSTER

Agency Name: \_\_\_\_\_

Instructor Name: \_\_\_\_\_

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Return completed form to : Utah Division of Substance Abuse and Mental Health  
120 N. 200 W., Room 209  
Salt Lake City, UT 84103  
Attention: Substance Abuse Education Program Manager